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CENTRAL FAX CENTER****MAY 09 2005****CONFIDENTIAL
FACSIMILE TRANSMITTAL SHEET****DATE SENT:** May 9, 2005**DELIVER TO:**Name: Examiner Khawar IqbalCompany: USPTO / GAU 2686Fax No: 703-872-9306**FROM:** Brian S. Myers**YOUR FILE:** 10/080,977

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- Transmittal Form
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PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

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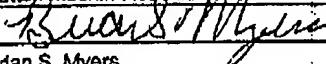
(to be used for all correspondence after initial filing)

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/080,877
	Filing Date	2/21/02
	First Named Inventor	Kanagawa, Atsushi
	Art Unit	2686
	Examiner Name	Khawar Iqbal
Total Number of Pages In This Submission	Attorney Docket Number	FUJO 19.465

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance communication to (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Katten Muchin Rosenman LLP		
Signature			
Printed name	Brian S. Myers		
Date	May 9, 2005	Reg. No.	46947

CERTIFICATE OF TRANSMISSION/MAILING

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Signature			
Typed or printed name	Brandi Franklin	Date	May 9, 2005

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FUJO 19.465
10/080,977

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Atsushi Kanagawa

Serial No.: 10/080,977

Group Art Unit: 2686

Filed: 2/21/2002

Examiner: Khawar Iqbal

Title: *Mobile Communications System*RECEIVED
CENTRAL FAX CENTER
MAY 09 2005AMENDMENT AFTER FINAL

MS AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the outstanding office action of 2/7/2005, please amend the above-identified application as follows:

MAY-09-2005 MON 03:19 PM LACASSE AND ASSOCIATES

FAX NO. 7038387684

P. 04

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10/080,977

In the Drawings:

None

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PAGE 4/21 * RCVD AT 5/9/2005 3:24:31 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-1/1 * DNIS:8729306 * CSID:7038387684 * DURATION (mm:ss):05:40

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In the Specification:

None

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